



Using telephone advice for patients with long-term conditions:

an RCN guide to using technology to complement nursing practice





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For information

The term *health care practitioner* is used throughout this document to include all practitioners who deliver health care services across health and social care settings: *clinicians, nurse practitioners, registered nurses, health care support workers*.

1. Introduction: the benefits of telephone advice

Telephone advice lines can help to improve patient access to services, and reduce the need for more frequent face-to-face contact. For patients with long-term conditions, (LTCs), telephone advice can improve access to coaching and care management advice (including palliative care). The benefits include speedier symptom checks, better medication monitoring and quicker responsive care, tailored to meet an individual's needs. As a stand-alone

health offer or as part of a wider range of eHealth services, telephone advice can help to instil confidence in patients for better self-management to enhance their health and wellbeing.

Please refer to the overview guidance [*Using technology to complement nursing practice: a guide for health care practitioners*](#) (004 228) for more information and advice.





2. Your guide to offering telephone advice services

This guide provides health care practitioners with an initial framework for building or redesigning a telephone advice service. It focuses on meeting your local area needs, where tailor-made, patient-specific enhancement complements the general advice on LTCs provided by your local GP surgery, NHS Direct, NHS 24 in Scotland, NHS Health in Wales and the NHS OwnHealth service for people with diabetes, cardiovascular disease, heart failure, and chronic obstructive pulmonary disease (COPD).

This guide is not intended to replace primary care consultations, surgical pre-treatment, triage services or patient-led charitable

organisation telephone services. It is not to be considered an alternative to A&E call-out services. To supplement this advice, health care practitioners should also seek information and best practice examples from specialists in the field.

For a helpful overview of the principles of establishing an eHealth service that uses information and communications technology (ICT) to enhance health care delivery, the RCN has produced overarching guidance on using technology to deliver safe and effective health care for patients with LTCs: [*Using technology to complement nursing practice*](#) (004 228).



3. Types of telephone advice services

Your telephone advice service could take many forms – from a dedicated dial-in advice line (patients use their landline, mobile or specialised telephone equipment to call for local advice) to a practitioner call-out service offering patients or carers personalised care control. For instance:

- telephone reminders about appointments, medications or treatments
- direct dial number for patients to ask specific questions about their LTCs and general health issues, leading to a personal response, consultation or referral
- direct dial for dealing with urgent situations requiring immediate action
- automated advice and health management guidance on issues related to LTCs
- automated information and signposting to other available services and organisations.


4. Ten questions to ask before you begin

Before you establish a new telephone advice service, or review an existing one, you should plan ahead and be clear about your objectives. Your professional principles of practice should be at the heart of all services. Use the following ten questions as a helpful starting point:

1. Looking at your local community – its geography, social, cultural and health issues – what is the potential for telephone advice, and is the ICT available to support it?
2. What are your own patient group's needs for service provision within local and national NHS policy, including clinical governance frameworks?
3. What telephone advice and support currently exists – for example, voluntary or medical services – and how do patients use them?
4. If there is a clear need, what type of service will suit – direct response or answer phone – and what will its agreed service levels be?
5. Will support and advice be extended to the patient's family and carers, primary and secondary care?
6. What will happen if the advice line is closed or out of order?
7. How will the service deal with emergency calls?
8. What training is needed for service providers and how will it be funded?
9. How will the service be monitored, reviewed and audited to maintain quality and standards?
10. How will you promote the service, its aims and objectives, to patients and potential users?



www.yhhic.org.uk/telehealthtoolkit/



You can also find excellent examples and good practice in setting up a telephone advice service from the Yorkshire & Humber Health Innovation & Education Cluster's *Telehealth toolkit*. The telehealth resource has been designed to support health professionals set up a new service. It provides information about technology and service models specifically for people with long-term conditions.

Key contacts to involve

Collaboration is key for the success of your telephone advice. To ensure alignment, talk to your multi-professional clinical team and local patient groups and make sure you have access to the best medical expertise for support when complex problems arise. There are key contacts you will want to involve in your planning and preparation, including all nursing practitioners who will be involved in delivering telephone advice. These key contacts are:

1. ICT infrastructure manager
2. ICT customer relationship manager
3. web team manager
4. management information analyst
5. infrastructure support manager.

For more details on these key contacts, please refer to the overview guidance [*Using technology to complement nursing practice: a guide for health care practitioners*](#)

Other issues to consider

There will be other issues specific to your area and patient group that you will want to consider in your planning phase. For example, it will be important

to look at your patient group's access to the technology needed for a remote consultation – not all patients will have access to, or be comfortable using, mobile telephony. Your service design may need to focus on the use of a patient's landline only. Also, you should consider the telephone number patients would use to access your advice service. There are different costs to the patient dialling 0345, 0800, 0845 or geographic numbers, which could impact patient buy-in to the service.





5. Principles of good practice

Like other eHealth services, telephone advice must follow best practice that reinforces your professional principles and codes of practice at all times.

Governance

The service plan must comply with the Nursing and Midwifery Council (NMC) *Code of professional conduct*.

View the code:

www.nmc-uk.org/Nurses-and-midwives/The-code/The-code-in-full

You should also ensure that an up-to-date organisational policy exists for patient privacy and confidentiality, including the use of landline and mobile phones, and restricting the use of Skype which is not a secure line and so unsuitable for use in this instance.

Read the Good Governance Institute's *Better care for people with long-term conditions: the quality and good governance of telehealth services*:

www.good-governance.org.uk/Downloads/GGI_Tunstall_Longtermconditions.pdf

Accountability

The service must:

- comply with governance and legal frameworks
- include a plan for ongoing training and support (including administrative needs) for service providers
- manage risks, including identifying difficult issues that could arise

- provide regular review, audit and evaluation
- have clear documentation and records.

Clear documentation and records

Good information management should be maintained, in accordance with the NMC *Record keeping guidance for nurses and midwives 2009* covering:

- information and how it is recorded
- using recording systems to record each call in order to provide backup documentation
- storage of data in accordance with local trust policies and data protection guidance
- recording outcomes, such as treatment changes, and ensuring that information is clear for interpretation by patients or for review
- complaints procedures
- audit of services
- informing the patient – type of information and how it will communicate the outcomes – for example, using proforma or protocols.

View the guidance:

www.nmc-uk.org/Documents/Guidance/nmcGuidanceRecordKeepingGuidanceforNursesandMidwives.



6. Setting up your telephone advice service

A planning phase based on good practice principles and collaboration, with clear service aims, will give you a solid foundation for a successful telephone advice service. Other initial tasks will include:

- using equipment that is suitable, updated and maintained
- ability to respond to patients in languages other than English www.languageline.co.uk
- establishing a named nurse or practitioner to be responsible for the service
- ensuring that clients understand how their information will be used by the health delivery team
- taking account of local needs for services for patients with hearing and sight difficulties.

Keys to successful consultations

Giving thought and consideration to a small number of factors in the preparation stages can help ensure a better telephone advice service. For successful telephone advice consultations, it is important to have:

- an environment with minimal distractions and background noise
- equipment with good sound quality
- the use of headsets where possible so that hands are free
- appropriate time to acquire the sufficient patient information to ensure sound clinical decision-making
- patient privacy and confidentiality throughout the consultation
- the ability to provide clear and concise advice and guidance
- an empathetic manner, reassuring and reiterating the issues to confirm the callers concerns and needs.

Medication issues

One of the key benefits of eHealth is to enable better monitoring and stricter control of medication dosage, in accordance with a patient's changing symptoms. Having an accurate clinical history is essential, but a remote consultation presents more challenges than the usual clinical outpatient setting. To help clarify the situation, you should:

- be clear on the advice service's remit for changing medications and prescriptions over the phone
- have ease of access to electronic patient records and appropriate documentation to support the discussion
- obtain the patient's consent to access records where required
- ensure the patient has repeat prescriptions and medications at hand to provide precise information about dose and frequency
- find out about the patient's other monitoring and outpatient appointments
- consider any medication adjustments or actions needed for treatments – for instance, for planned surgery
- add appropriate and prompt documentation to the patient's records so that all practitioners have access to the updated information
- inform the patient's primary health care team of any changes.



7. Ongoing training and support

With any eHealth service, there are core competencies and key clinical skills that should be covered in training. These are included in the overarching guidance:

Using technology to complement nursing practice: a guide for nurses (004 228)

To ensure a high-quality telephone advice service, there will be the need for additional, specific training for service providers. This might include:

- call-handling skills
- use of non-visual communication skills

- telephone interview skills
- how to encourage callers to impart all relevant clinical and general information
- how to give clear, succinct and empathetic responses.

Service providers must also have adequate clinical supervision to ensure that they are supported and able to cope with the additional stress related to providing telephone consultation services.



8. Evaluation and audit

Telephone advice line services must be audited and reviewed to ensure safe, cost-effective and adequate provision. If the aims and objectives of the service are clear, with achievable standards, evaluation and audit will provide a focus for business planning and any future provision changes.

A service evaluation should include:

- what patients expect from the service
- how the telephone advice line is used
- how many callers use the service (monthly and annually)
- the benefits gained
- the limitations to service provision
- time taken to provide the service
- a cost-benefit analysis.

9. Promoting your telephone advice service

As well as promoting the telephone advice to patients who will benefit from the service, you will want to ensure that all health care professionals providing patient support are aware of the service, along with other health care professionals and patient care groups in your area.

To reach all relevant personnel, information should be easy to understand and state clearly the service aims. Promotional letters, leaflets, cards, emails, e-news and texts should include:

- confidential contact phone number
- hours and duration of service
- term-time, weekend and holiday availability
- expected response time (for example, within 24 hours or two days)
- clarity on the potential cost of calls – especially call-forwarding from landlines to mobiles which could be an issue for out-of-hours services.

Other essential terms and conditions will include:

- confidentiality requirements, including keeping call records
- what patients should do if there is no response by the stated time
- alternative phone contact numbers if there are technical or availability problems
- contingency plans such as alternative contact numbers if there are technical or availability problems
- terms of use based on local policies – for example, abuse of the service will not be tolerated
- procedure for feedback – complaints, comments, suggestions.





10. Conclusion

Technology is helping to improve patient outcomes by improving access to services. Telephone advice services are playing an important role in enhancing self-management and supporting patients with LTCs. Advice lines also provide prompt advice and support when urgent guidance is needed and can be used for consultations and reviews of treatment and medication.

This guide provides an initial framework for providing telephone advice services for individuals with LTCs, their families and carers. Health care practitioners should seek further information from specialist fields of practice to supplement this general guide. By consulting the right personnel and establishing procedures

for monitoring and evaluating services, health care practitioners interested in extending their practice can explore innovative approaches to telephone advice to support patients and enhance service provision.

For more information on delivering other eHealth services, please refer to the overview guidance and our separate guides for specific eHealth services:

- [*Using technology to complement nursing practice: a guide for health care practitioners*](#) (004 228)
- [*Text messaging services*](#) (004 230)
- [*Web-based support*](#) (004 231)
- [*Remote monitoring services*](#) (004 232).



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